

Hand-Delivered

FILED
CHARLOTTE, NC

APR 22 2025

US DISTRICT COURT
WESTERN DISTRICT OF NC

UNITED STATES DISTRICT COURT

WESTERN DISTRICT OF NORTH CAROLINA

CASE NO. 430-2023-02867
3:25-cv-273-MOC

Chiquita Kelly

Plaintiff,

vs.

COMPLAINT

Carolinas Continue Care Pinnacle
10648 Park Rd.
Charlotte, NC 28210

Defendant(s).

A. JURISDICTION

This action is brought pursuant to Title VII of the Civil Rights Act of 1964 as amended, for employment discrimination. Jurisdiction is specifically conferred on this Court by 42 U.S.C. Section 2000e(5). Equitable and other relief are also sought under 42 U.S.C. 2000e(5)(g). Jurisdiction is also based on 28 U.S.C. Sections 1331, 1343 and 42 U.S.C. Sections 1981 et seq. Where employment discrimination based upon age is alleged, jurisdiction is conferred by 29 U.S.C. Sections 626(c)(1) and 626(e) and appropriate relief is also sought.

B. PARTIES

1. Name of Plaintiff:

Address:

Chiquita Kelln
1010 Brookland Place
Waxhaw NC 28173

2. Name of first Defendant:

Address:

Carolinas Continue Care Pinerille
10648 Park Rd
Charlotte, NC 28210

3. Name of second Defendant:

Address:

~~Union Memorial Regional Medical Center, Inc. Bldg 161A~~ error ck
~~African Health Monrovia~~
~~4435 Golf Acres Dr. #150~~
~~Charlotte, NC 28208~~

4. Name of third Defendant:

Address:

(Use additional sheets if necessary.)

C. NATURE OF CASE

1. The address at which I sought employment or was employed by the defendant(s) is:

10648 Park Rd Charlotte NC 28210

2. The discriminatory acts occurred on or about:

May 17, 2023 (Month, Day, Year)

3. I filed charges with the Equal Employment Opportunity Commission regarding the defendant's discriminatory conduct on or about:

September 20, 2023 (Month, Day, Year)

4. The Equal Employment Opportunity Commission sent the attached "Notice of Right to Sue" which I received on:

February 11, 2025 (Month, Day, Year)

5. The discriminatory acts that are the basis of this suit are:

- a. ☐ Failure to employ me.
- b. ☐ Failure to promote me.
- c. ☐ Termination of my employment.
- d. ☐ Demotion.
- e. ☒ Denied equal pay/work.
- f. ☐ Sexual harassment.
- g. ☐ General harassment.
- h. ☒ Other acts (Be specific: Attach an additional sheet if necessary)

I was discriminated at a sister hospital. I filed a claim with the EEOC. Then went to work at this location & they lower my pay & told me why & I was the only persons pay that was decreased.

6. Defendant's conduct is discriminatory with respect to:

- a. ☐ my race
- b. ☒ my color
- c. ☐ my sex
- d. ☐ my religion
- e. ☐ my national origin
- f. ☐ my age

7. I believe that the defendant is still committing these acts against me.

YES ☒ NO ☐

D. CAUSE OF ACTION

1. I allege that the defendant has discriminated against me and that the following facts form the basis for my allegations:

Count 1: Title VII of the Civil Rights Act of 1964, states its unlawful to discriminate Based on Characteristics such as Race. I was discriminated against due to my Race.

Supporting Facts: (Describe exactly what each defendant did or did not do. State the facts clearly in your own words without citing any legal authority. Use additional sheets if necessary.)

One Company made the work environment hostile & toxic then decreased my pay when I reported it. After I quit & report them to the EEOC they had my current Employer Caroline Contine call to decrease my pay as well.

Count 2: _____

Supporting Facts:

I have a current lawsuit going with the first company. Along with signed contracts with pay stub from both companies and other company that would not work with me after I reported the company.

E. INJURY

How have you been injured by the actions of the defendant(s)?

I have been financial strain since this all began. I almost lost my home. I lost my 22 year marriage. I have not been able to obtain work within 2 hours of my home.

F. PREVIOUS LAWSUITS AND ADMINISTRATIVE RELIEF

Have you filed other lawsuits in state or federal court that deal with the same facts that are involved in this action? YES ☒ NO ☒

If your answer is "YES", describe each lawsuit. (If there are more than one lawsuits, describe additional lawsuits on additional separate pages, using the same outline.)

1. Parties to previous lawsuits:

Plaintiff(s): Chiquita Kelln

Defendant(s): Union Memorial Regional

2. Name of court and case or docket number: Mecklenburg

3:24-cv-00403-FDW-DCK

3. Disposition (for example, was the case dismissed? Was it appealed? Is it still pending?)

Still pending

4. Issues raised:

5. When did you file the lawsuit? 4/21/24 (Date: Month/Year)

6. When was it (will it be) decided? 9/25/25

Have you previously sought informal or form relief from the appropriate administrative officials regarding the acts complained of in Part D?

YES ☒ NO ☐

If your answer is "YES" briefly describe how relief was sought and the results. If your answer is "NO" explain why administrative relief was not sought.

I spoke directly with human Resources to resolve the issue around why my pay was being decreased but did not get a fair answer & he was not willing to assist me in any way.

G. REQUEST FOR RELIEF

I believe I am entitled to the following relief:

Due to I am being Retaliated at this job for Reporting the Sister Company for promoting a Toxic Work Environment.

JURY TRIAL REQUESTED

YES ☒ NO ☐

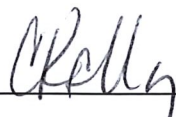
DECLARATION UNDER PENALTY OF PERJURY

The undersigned declares under penalty that he/she is the plaintiff in the above action, that he/she has read the above complaint and that the information contained therein is true and correct. 28 U.S.C. §1746; 18 U.S.C. §1621.

Executed at _____ on _____.

(Location)

(Date)



Signature

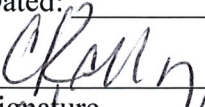
CERTIFICATE OF SERVICE

The following is an example of a certificate of service which may be placed at the end of any document filed with the Clerk and served on the opposing party. If you are filing the certificate service as a separate document, please include the case caption and specify the exact document that was served.

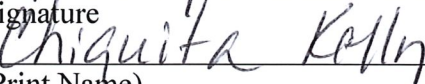
CERTIFICATE OF SERVICE

I hereby certify that a copy of the foregoing document was mailed/ delivered to the following individuals at the addresses listed:

Dated: _____



Signature



(Print Name)